

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>h</i>		05/01/01
O.I.P.E. CLASSIFIER	<i>Don</i>	32	5/21
FORMALITY REVIEW	<i>1114</i>	920	06-25-01
RESPONSE FORMALITY REVIEW	<i>75</i>	1127	09/19/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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685-55-587
 10/1/01
 9/2/01
 C.C.
 10-25-01